TOTAL ADD'L FEE

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	Under the Paperwork Reduction Act of 1995, no persons are required to respond to PATENT APPLICATION FEE DETERMINATION								RECORD	ormation unte	ss it displays a valid OMB control number.  Application or Docket Number		
	Substitute for Form PTO-875										10/766,18/		
	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
		FOR	NUM	NUMBER FILED			NUMBER EXTRA			FEE	1	RATE	FEE
		IC FEE CFR 1.16(a))		-					RATE		OR	1,4,1,5	s
	TOT	AL CLAIMS CFR 1.15(c))	17	//) minus 20 =					X \$ =	<u> </u>	1	x \$ =	·*
	IND	EPENDENT CLAIR	us /								OR		
	(5) OFR I. INDIVI								X \$=	<b> </b>	OR	X \$=	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+5=		OR	+\$=	•
	of the difference in column 1 is less than zero, enter "O" in column 2.								TOTAL		OR	TOTAL	
		CI	LAIMS AS AI										
		(Column 1) (Column 2) (Column 3)							SMALL ENTITY		OR		THAN ENTITY
ľ	ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MIR	2	Total (37 CFR 1.16(c))	. 2	Minus	2	0	*		x s =		OR	x \$ =	
נטן נ	END	independent (37 CFR 1.18(b))	. 2	Minus		3	-		x s=		OR OR	x s_ =	
1	AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))							+s_ =		OR	+s =	
	1-11-1								TOTAL		1	TOTAL	
		7[[\b][(	CC	)					ADD'L FEE		OR	ADO'L FEE	
	_	(Cotumn 1) (Cotumn 2) (Cotumn 3)											
	ENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID F	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
	ENDM	Total (37 CFR 1.18(4))	. 5	Minus	-2	$\bigcirc$	3		x \$=		OR:	x \$=	
		independent (37 CFR 1.16(b))	3	Minus		3	=		X \$=		OR 1	x s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+s =		OR	+s =	
									TOTAL ADD'L FEE		OR	TOTAL ADDL FEE	
	(Cotumn 1) (Cotumn 2) (Cotumn 3)								,		<b>.</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ENT C		CLAIMS REMAINING AFTER		HIGHE: NUMBE PREVIOU	ST R ISLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	É	Total	AMENDMENT	Minus	PAID FO	OR_	-			PEE	l	<u></u>	FEE_
	AMENDM	(37 CFR 1,18(c)) Independent	·	Minus	***	-		·	x s		OR	x s=	
		(37 CFR 1.18(b))		manus					x \$=		OR	X \$=	
	4	FIRST PRESENT	ATION OF MULTIP	LE DEPENDI	ENT CLAIM	(37 CF	R 1.16(d))				<b>~</b> B		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL ADD'L FEE